



BUSINESS LICENSE COMMISSION
COUNTY OF LOS ANGELES
374 KENNETH HAHN HALL OF ADMINISTRATION
500 WEST TEMPLE STREET
LOS ANGELES, CA 90012
(213) 974-7691



April 15, 2011

Susan Cameron
Muse Elementary School
1717 Old Topanga Canyon Rd
Topanga, CA 90290

MEMBERS
STEVEN AFRIAT
PRESIDENT
RENÉE CAMPBELL
VICE-PRESIDENT
SARA VASQUEZ
SECRETARY
JAMES BARGER
COMMISSIONER

HEARING ON APPLICATION FOR PRIVATE SCHOOL
BUSINESS LICENSE ID #137101

Dear Applicant:

The Business License Commission will hold a hearing on the above matter on **Wednesday, April 20, 2011 at 9:00 a.m.** in Room 374-A, 500 West Temple Street, Los Angeles, CA 90012. Your presence is requested at this hearing. If you are unable to attend you may authorize a representative to appear on your behalf. The representative must present signed and duly notarized letter giving authorization and the reasons you are unable to appear.

RIGHT TO REPRESENTATION / FOREIGN LANGUAGE SPEAKERS

You have the right to be represented at this hearing by an attorney or other individual of your choosing and at your own cost. In the absence of a representative, you must represent yourself and the hearing will proceed as scheduled.

If you require a translator, you must arrange at your own cost to have present at the hearing either a **professional/certified interpreter or other person who is fluent in both English and your native language.** If you are unable to locate an interpreter, please contact our office and you will be provided a list of interpreting services.

Parking is available at your cost in Lot 14, the Music Center lot, located at the corner of Grand Avenue and Temple Street. A map is enclosed. **Please note proceedings begin promptly at 9:00 a.m. The Business License Commission reserves the right to reschedule your hearing to a later date for failure to timely appear.**

Sincerely,

STEVEN AFRIAT
President

Twila P. Kerr
Commission Staff



BUSINESS LICENSE COMMISSION
COUNTY OF LOS ANGELES
374 KENNETH HAHN HALL OF ADMINISTRATION
500 WEST TEMPLE STREET
LOS ANGELES, CA 90012
(213) 974-7691



April 1, 2011

Susan Cameron
Muse Elementary School
1717 Old Topanga Canyon Rd
Topanga, CA 90290

MEMBERS
STEVEN AFRIAT
PRESIDENT
RENÉE CAMPBELL
VICE-PRESIDENT
SARA VASQUEZ
SECRETARY
JAMES BARGER
COMMISSIONER

HEARING ON APPLICATION FOR PRIVATE SCHOOL
BUSINESS LICENSE ID #137101

Dear Applicant:

The Business License Commission will hold a hearing on the above matter on **Wednesday, April 13, 2011 at 9:00 a.m.** in Room 374-A, 500 West Temple Street, Los Angeles, CA 90012. Your presence is requested at this hearing. If you are unable to attend you may authorize a representative to appear on your behalf. The representative must present signed and duly notarized letter giving authorization and the reasons you are unable to appear.

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Sincerely,

STEVEN AFRIAT
President

Twila P. Kerr
Commission Staff

NOTICE TO PRINTER
STATE LAW REQUIRES THAT THIS
LEGAL ADVERTISEMENT SHALL BE SET
IN TYPE NOT SMALLER THAN NONPAREIL (6 PT.)

CUSTOMER CODE : Z 91085

NEWSPAPER :.....XXXX

PUBLISH 3 TIMES

1ST PUBLISHING DATE:.....XXXXXXXXX
2ND PUBLISHING DATE:.....XXXXXXXXX
3RD PUBLISHING DATE:.....XXXXXXXXX

REPRINTS ORDERED: NONE

NOTICE ON HEARING TO CONDUCT

PRIVATE SCHOOL

NOTICE IS HEREBY GIVEN THAT APPLICATION HAS BEEN
MADE TO THE LOS ANGELES COUNTY BUSINESS LICENSE
COMMISSION TO CONDUCT

ADVANCE PROOF REQUESTED

ADDRESS OF PREMISES:.....1717 OLD TOPANGA CYN RD
TOPANGA, CA 90290
NAME OF APPLICANT:.....MUSE ELEMENTARY CALIF. NONPROFIT
PUBLIC BENEFIT CORP/ SUSAN CAMERON
MUSE ELEMENTARY SCHOOL
DATE OF HEARING:.....04/13/2011
TIME OF HEARING:.....09:00 A.M.

“ANY PERSON HAVING OBJECTIONS TO THE GRANTING OF
THE LICENSE MAY, AT ANY TIME PRIOR TO THE DATE ABOVE NAMED, FILE WITH THE BUSINESS
LICENSE COMMISSION HIS OBJECTIONS IN WRITING GIVING OF THE HEARING AND BE HEARD
RELATIVE THERETO”

OFFICE OF THE COMMISSION:

OFFICE OF THE COMMISSION
500 W. TEMPLE STREET RM. 374
LOS ANGELES, CA 90012

RETURN TO:

LOS ANGELES COUNTY TAX COLLECTOR
BUSINESS LICENSE SECTION
225 N. HILL STREET RM. 109
LOS ANGELES, CA 90012



**COUNTY OF LOS ANGELES
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90012



**BUSINESS LICENSE APPLICATION REFERRAL
SUMMARY SHEET**

KIND OF BUSINESS: **PRIVATE SCHOOL**

ADDRESS OF BUSINESS: **1717 OLD TOPANGA CYN RD, TOPANGA, CA 90290**

TELEPHONE: **(310) 656-6112**

OWNER OF BUSINESS: **MUSE ELEMENTARY NONPROFIT CORP**

CAL. DR. LIC.# :

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: **MUSE ELEMENTARY SCHOOL**

MAILING ADDRESS: **919 SANTA MONICA BLVD, SANTA MONICA, CA 90401**

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: **NEW LICENSE**

APPROVED

DATE

SIGNATURE

<input type="checkbox"/>	1. Animal Care & Control			
<input type="checkbox"/>	2. Risk Management			
<input checked="" type="checkbox"/>	3. Building & Safety	YES	06/30/10	
<input checked="" type="checkbox"/>	4. Fire Department	YES	08/20/10	
<input checked="" type="checkbox"/>	5. Public Health	YES	07/01/10	
<input checked="" type="checkbox"/>	6. Treasurer & Tax Collector	YES	03/11/11	
<input checked="" type="checkbox"/>	7. Business License Commission			
<input type="checkbox"/>	8. Sheriff Department			
<input checked="" type="checkbox"/>	9. Regional Planning Commission	YES	03/09/10	
<input type="checkbox"/>	10. Weights and Measures			
<input type="checkbox"/>	11. Publishing			
<input type="checkbox"/>	12. Public Works - EPD			
<input checked="" type="checkbox"/>	13. Sheriff Fingerprint	YES	03/26/10	

Conditions:



Treasurer & Tax Collector
Application for Business License

Fee: \$

I.D. # 137101

Type of Business 0622 School Private

Address of Business 1717 OLD TORANCA CANYON RD - TOPANCA, CA.

Bus. Phone (BID) 656-6112 Fax Phone (BID) 656-6122 Home Phone ()

DBA (Bus. Name) MUSE ELEMENTARY SCHOOL

Applicant's Full Name SUSAN ELIZABETH AMIS CAMERON

Mailing Address 919 SANTA MONICA BLVD - SANTA MONICA, CA. 90401

Home Address

SS# Date of Birth Place of Birth

State Driver's Lic. / I.D. Card Exp. Date

Male Female Ht Wt Hair Color Eye Color

Business Ownership Structure

Single Owner Partnership LLC Corporation X - NONPROFIT

"Corporation / LLC Status"

ate of Incorporation 8-10-06 Incorporated in the State of CALIFORNIA

Exact Corporate Name MUSE ELEMENTARY, CALIFORNIA NONPROFIT PUBLIC BENEFIT CORPORATION

Name of Officers	Addresses	Title
SUSAN CAMERON	919 SANTA MONICA BLVD SANTA MONICA, CA	PRESIDENT
REBECCA AMIS	919 SANTA MONICA BLVD SANTA MONICA, CA	V P
PATRICK DUNN	16255 VENTURA BLVD # 525 ENCINO, CA.	CFO

Information contained herein is true and correct to the best of my knowledge and belief. As a condition of the issuance of the license applied for, I agree; to not provide any additional information that may be required; to conduct all phases of this business license in accordance with regulations established for such business and to maintain all trucks or equipment that may be used in connection therewith, in conformance with all applicable laws, ordinances and regulations.

Date 3-8-10

Applicant's Signature

Application Taken by:

Franklin Haynes

Date:

03-08-10



MARK J. SALADINO
TREASURER AND TAX COLLECTOR

COUNTY OF LOS ANGELES TREASURER AND TAX COLLECTOR

County of Los Angeles
TREASURER AND TAX COLLECTOR
REVENUE & ENFORCEMENT DIVISION
BUSINESS LICENSE SECTION



TO: DEPARTMENT OF REGIONAL PLANNING
320 W. TEMPLE STREET, 13TH FLOOR, ROOM 1360
LOS ANGELES, CA 90012
(213) 974-6411

FROM: BUSINESS LICENSE SECTION
225 N. HILL STREET, ROOM 109
LOS ANGELES, CA 90012
(213) 974-2011

213-633-5427

DEPARTMENT OF REGIONAL PLANNING REQUIRES A FEE
MONDAY thru THURSDAY 7:30 AM - 6:00 PM. Closed on Friday

RBUS # 201000098

DATE: 03-08-2010

ID # 137101

BUSINESS CLASSIFICATION AND CODE: School Private-0622

BUSINESS ADDRESS: 1717 OLD Topanga Canyon RD

CITY: Topanga ZIP CODE: 90290

NAME OF OWNER: Muse Elementary / Suzy Cameron

D.B.A./ NAME OF BUSINESS: MUSE ELEMENTARY

MAILING ADDRESS: 919 Santa Monica Blvd Santa Monica 90401

PHONE NUMBER: (310) 656 6112

ZONE: A-1-10 Santa Monica Mtns North Area

APPROVED: ☒

DENIED: ☐

REMARKS: Approved per CP96184. Must comply with all the conditions of CP96184.

SIGNATURE: [Signature]

DATE: 3-8-2010

REGIONAL PLANNING STAMP

JD:jd

Business License Approval

Department of Regional Planning
320 West Temple Street, Room 1360
Los Angeles, CA 90012

**COUNTY OF LOS ANGELES
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

**BUSINESS LICENSE
APPLICATION REFERRAL**25
3/9/10

KIND OF BUSINESS: PRIVATE SCHOOL

ADDRESS OF BUSINESS: 1717 OLD TOPANGA CYN RD, TOPANGA, CA 90290

TELEPHONE: (310) 636-6112

OWNER OF BUSINESS: MUSE ELEMENTARY NONPROFIT CORP

CAL. DR. LIC.#:

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: MUSE ELEMENTARY SCHOOL

MAILING ADDRESS: 919 SANTA MONICA BLVD, SANTA MONICA, CA 90401

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: NEW LICENSE

**PUBLIC HEALTH
LA COUNTY**☒ APPROVAL☐ DENIAL

RECOMMENDATION: _____

SIGNATURE: Muse SchoolDATE: 6/29/10

SIC LICENSE NO. 0622

DATE 03/09/10

IDENTIFICATION NUMBER 137101

**COUNTY OF LOS ANGELES
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

**BUSINESS LICENSE
APPLICATION REFERRAL**

910-00036

KIND OF BUSINESS: PRIVATE SCHOOL

ADDRESS OF BUSINESS: 1717 OLD TOPANGA CYN RD, TOPANGA, CA 90290

TELEPHONE: (310) 656-6112

OWNER OF BUSINESS: MUSE ELEMENTARY NONPROFIT CORP

CAL. DR. LIC.# :

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: MUSE ELEMENTARY SCHOOL

MAILING ADDRESS: 919 SANTA MONICA BLVD, SANTA MONICA, CA 90401

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: NEW LICENSE

SHERIFF FINGERPRINT

LA COUNTY

☒ APPROVAL

☐ DENIAL

RECOMMENDATION: _____

Approved

SIGNATURE: _____



DATE: _____

1/20/10

BASIC LICENSE NO. 0622

DATE 03/09/10

IDENTIFICATION NUMBER 137101

134885

C.H.

**COUNTY OF LOS ANGELES
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

**BUSINESS LICENSE
APPLICATION REFERRAL**

NRCB

KIND OF BUSINESS: PRIVATE SCHOOL

ADDRESS OF BUSINESS: 1717 OLD TOPANGA CYN RD, TOPANGA, CA 90290

TELEPHONE: (310) 656-6112

OWNER OF BUSINESS: MUSE ELEMENTARY NONPROFIT CORP

CAL. DR. LIC.#:

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: MUSE ELEMENTARY SCHOOL

MAILING ADDRESS: 919 SANTA MONICA BLVD, SANTA MONICA, CA 90401

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: NEW LICENSE

**FIRE DEPARTMENT
LA COUNTY**

☒ **APPROVAL**

☐ **DENIAL**

RECOMMENDATION:

Responsible Fire Safe

SIGNATURE:

[Signature]
R. Gunther Insp 33A

DATE:

8-19-10

BASIC LICENSE NO. 0622

DATE 03/09/10

IDENTIFICATION NUMBER 137101

**COUNTY OF LOS ANGELES
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

**BUSINESS LICENSE
APPLICATION REFERRAL**

KIND OF BUSINESS: **PRIVATE SCHOOL**

ADDRESS OF BUSINESS: **1717 OLD TOPANGA CYN RD, TOPANGA, CA 90290**

TELEPHONE: **(310) 656-6112**

OWNER OF BUSINESS: **MUSE ELEMENTARY NONPROFIT CORP**

CAL. DR. LIC.#:

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: **MUSE ELEMENTARY SCHOOL**

MAILING ADDRESS: **919 SANTA MONICA BLVD, SANTA MONICA, CA 90401**

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: **NEW LICENSE**

TREASURER & TAX COLLECTOR

LA COUNTY

☒ **APPROVAL**

☐ **DENIAL**

RECOMMENDATION: _____

SIGNATURE: _____

DATE: 3/10/11

BASIC LICENSE NO. **0622**

DATE **03/09/10**

IDENTIFICATION NUMBER **137101**

COUNTY OF LOS ANGELES
TREASURER AND TAX COLLECTOR

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

BUSINESS LICENSE
APPLICATION REFERRAL

KIND OF BUSINESS PRIVATE SCHOOL

ADDRESS OF BUSINESS 1717 OLD TOPANGA CYN RD, TOPANGA, CA 90290

TELEPHONE (310) 656-6112

OWNER OF BUSINESS MUSE ELEMENTARY NONPROFIT CORP

CAL. DR. LIC.#

NAME OF PERSON FINGERPRINTED

FICTITIOUS NAME MUSE ELEMENTARY SCHOOL

MAILING ADDRESS 919 SANTA MONICA BLVD, SANTA MONICA, CA 90401

DATE THAT YOU STARTED BUSINESS

PREVIOUS OWNER'S NAME, IF KNOWN

THIS IS AN APPLICATION FOR NEW LICENSE

BUILDING & SAFETY
LA COUNTY

*This application is
Now Approved
6-23-10*

☒ APPROVAL

☒ DENIAL

Denial Reason:
RECOMMENDATION

*have applicant apply through Building & Safety
for occupancy change.*

SIGNATURE: *[Signature]*

DATE: *3-9-10*

BASIC LICENSE NO 0622

DATE 03/09/10

IDENTIFICATION NUMBER 137101